FORM D

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB Number: 3	235-0076			
Expires: March	31, 1991			
Estimated average burden				
hours per response16.00				
SEC USE ONLY				
Prefix	Serial			
	1			
DATE RECEIVED				

OMB APPROVAL

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

Rule 504	Rule 505		Section 4(6)	ULOE	
Amendment					
A. BASIC I	DENTIFICAT	TION DATA			
nendment and name has		licate change.)		08048632	
and Street, City, State, Z	Lip Code)	Telephone Numb	er (Including Area	Code)	
4N 55101		(651) 227-7333			
s (Number and Street, C	ity, State, Zip Co	ode) Telephone Numbe	r (Including Area (Code)	
property identified as	Ballwin Missour	ri KinderCare Learning	Center Co-Tenano	·	
				PROCESSE	
corporation limited partnership, already formed business trust limited partnership, to be formed other (plea					
	Month	Year		THOMSON REUT	
n or Organization:		Actual	Estimated (Not A	pplicable)	
,				,	
	Amendment A. BASIC I t the issuer mendment and name has Limited Partnership and Street, City, State, Z MN 55101 s (Number and Street, C property identified as led partnership, already for the partnership, to be form on Organization: ation: (Enter two-letter U	Amendment A. BASIC IDENTIFICAT It the issuer mendment and name has changed, and ind Limited Partnership and Street, City, State, Zip Code) MN 55101 s (Number and Street, City, State, Zip Code) property identified as Ballwin Missour ed partnership, already formed ed partnership, to be formed Month on or Organization: ation: (Enter two-letter U.S. Postal Service)	Amendment A. BASIC IDENTIFICATION DATA t the issuer mendment and name has changed, and indicate change.) Limited Partnership and Street, City, State, Zip Code) MN 55101 S (Number and Street, City, State, Zip Code) Property identified as Ballwin Missouri KinderCare Learning and Street, City, State, Zip Code) Felephone Number for other (please special partnership, to be formed Month Year	Amendment A. BASIC IDENTIFICATION DATA It the issuer Intendment and name has changed, and indicate change.) Limited Partnership and Street, City, State, Zip Code) Telephone Number (Including Area (651) 227-7333 Is (Number and Street, City, State, Zip Code) Telephone Number (Including Area (Incl	

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6). 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA (Con't)

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years:
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of 10% or more of a class of equity securities of the issuer:
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name: (Last name first, if	individual)				
AEI Income & Growt	h Fund XXI Lim	nited Partnership			
Business or Residence Address 30 E. 7th Street, Suite	•		·		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☑ General and/or Managing Partner
Full Name: (Last name first, if	individual)				
AEI Fund Managemen	nt XXI, Inc.				
Business or Residence Address 30 E. 7th Street, Suite)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	⊠Executive Officer	Director	General and/or Managing Partner
Full Name: (Last name first, if Johnson, Robert P.	individual)				
Business or Residence Address 30 E. 7th Street, Suite	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name: (Last name first, if Keene, Patrick	individual)				
Business or Residence Address	(Number and S	Street, City, State, Zip Code	e)	· · · · · · · · · · · · · · · · · · ·	
30 E. 7th Street, Suite	1300 St. Paul, N	MN 55101			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name: (Last name first, if	individual)				
Business or Residence Address	s: (Number and St	reet, City, State, Zip Code)	, ,,,		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name: (Last name first, if	individual)				
Business or Residence Address	s: (Number and St	reet, City, State, Zip Code		 	<u> </u>
			<u> </u>		·····

	B. INFORMATION ABOUT OFFERING			
			Yes	No
1.	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?			\boxtimes
2	. What is the minimum investment that will be accepted from any individual?		\$ Yes	5,000 No
3	. Does the offering permit joint ownership of a single unit?		X	
4	. Enter the information requested for each person who has been or will be paid or given, directly or indire commission or similar remuneration for solicitation of purchasers in connection with sales of securities i offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be list associated persons of such a broker or dealer, you may set forth the information for that broker or dealer	n the SEC ed are		
Full	Name: (Last name first, if individual) "Distribution is through NASD member firms. See Attached Exhibit A."			
Bus	iness or Residence Address: (Number and Street, City, State, Zip Code)			
 Nan	ne of Associated Broker or Dealer			
Stat	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers		_	
((Check "All States" or check individual States)	X	l All S	
		FL] [GA]	[HI]	[ID]
[]]			[MS]	
[R		[OH] [OK] [WV] [WI]	[OR] [WY	
٢.,	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE			, ()
;	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box r and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	A	A	41
	Type of Security	Aggregate Offering Price	Amo	unt Already Sold
	Debt	\$	\$	
	Equity	\$	\$	
	Convertible Securities (including warrants)	\$	s	
	Partnership Interests	\$	\$	
	Other: (Specify: Co-tenancy interests in real property,)	\$3,100,000	\$	<u></u>
	Total	\$ <u>3,100,000</u>	\$	
1	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Dol	ggregate lar Amount Purchases
	Accredited investors		\$	
	Non-accredited Investors		\$	
	Total (for filings under Rule 504 only)		\$	

3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		S
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		y
	Transfer Agent's Fees	•••••	\$0
	Printing and Engraving Costs	*************	\$100
	Legal Fees	***************************************	\$500
	Accounting Fees		\$ <u>100</u>
	Engineering Fees	•••••	\$0
	Sales Commissions (specify finders' fees separately)	************	\$ 155,000
	Other Expenses (identify)		\$
	Total	***************************************	\$ 155,700
5.	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and to expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to issuer." Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set for response to Part C - Question 4.b. above.	the of the left th in	\$ <u>2,944,300</u>
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and Fees	\$	\$
	Purchase of real estate	\$	\$
	Purchase, rental or leasing and installation of machinery and equipment	\$	\$
	Construction or leasing of plant buildings and facilities	\$	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	\$	s
	Repayment of indebtedness	\$	\$
	Working capital	\$	
	Other (specify): Payment for Real Estate	\$ 2,944,300	\$
		e_ <u>#12777,300</u>	~ _
	Column Totals	3	\$
	Total Payments Listed (column totals added)	\$ <u>2</u> .	944,300
_	D. FEDERAL SIGNATURE		

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Signature

Issuer: (Print or Type)

AEI Income & Growth Fund XXI Limited Partnership

Name of Signer: (Print or Type)

AEI Income & Growth Fund XXI Limited Partnership, a

Minnesota limited partnership

By: AEI Fund Management XXI, Inc., its

corporate general partner

By: Rona Newtson, Authorized Signatory for Robert P. Johnson, its President

Date

5-6-08

Title of Signer (Print or Type): Authorized Signatory

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE		
1. Is any party described in 17 CRF 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
AEI Income & Growth Fund XXI Limited Partnership		
Name (Print or Type) AEI Income & Growth Fund XXI Limited Partnership, a Minnesota limited partnership By: AEI Fund Management XXI, Inc., its corporate general partner By: Rona Newtson, Authorized Signatory for Robert P. John	Title (Print or Type): President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Exhibit "A" Dated May 5, 2008

Following are broker-dealers who have executed selling agreements at this time:

None

